

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Tre application of: McDevitt, Jason P.; Tyrrell, David John

Application No.: 10/016,849

Group No.: 3761

Filed: 12/14/2001

Examiner: Kim M. Lewis

For: Removal of Targeted Proteases with Proteinaceous Wound Dressings Containing Growth Factors

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8(a)

I hereby certify that the attached correspondence comprising:

- 1. Fee Transmittal (1 page).
- 2. Petition and Fee for Extension of Time (2 pages).
- 3. Amendment and Response Transmittal (2 pages).
- 4. Amendment and Response (12 pages).
- 5. Check No. 24169 in the amount of \$950.00 (1 page).
- 6. Return Postcard.

is being deposited with the United States Postal Service, with sufficient postage, as first class mail in an envelope addressed to:

Commissioner for Patents, P.O. Box 1450
Alexandria, VA 22313-1450

on March 8, 2004.

Deboreh Anne Weiner

Signature of person mailing paper

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MAR 1 6 2004

TECHNOLOGY CENTER R3700

PTO/SB/17 (10-03)

Approved for use through 07/31/2006. OMB 0651-0032
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Application Number

Attorney Docket No.

FEE TRANSMITTAL for FY 2004

(\$) 950.00

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

BATTAN TRADEM

MAR 1 0 2004

Signature

Filing Date	December 14, 2001
First Named Inventor	McDevitt et al.
Examiner Name	Kim M. Lewis
Art Unit	3761

Complete if Known

10/016,849

03768/09630

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)							
Check Credit card Money Other None	3.	3. ADDITIONAL FEES							
		Large Entity Small Entity							
Deposit Account:	Fee	Fee	Fee	Fee	Fee	Description			
Deposit Account 50-2548	Cod	de (\$)	Code	(\$)		Description	Fee Paid		
Number	105	130	2051	65	Surcharge - late	e filing fee or oath			
Deposit Account Nelson Mullins	105	52 50	2052	25	Surcharge - late cover sheet	e provisional filing fee or			
Name	105	3 130	1053	130	Non-English sp	ecification			
The Director is authorized to: (check all that apply)		2 2,520	1812			est for ex parte reexamination			
Charge fee(s) indicated below Credit any overpayments	180		1804			olication of SIR prior to			
Charge any additional fee(s) or any underpayment of fee(s)	,,,,	- 520	'007	520	Examiner action				
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FEE CALCULATION	125		2251	55		eply within first month	—		
1. BASIC FILING FEE	125		2252	210	Extension for r	eply within second month	950.00		
Large Entity Small Entity	125	3 950	2253	475	Extension for r	eply within third month	330.00		
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1001 770 2001 385 Utility filing fee	125	5 2,010	2255	1,005	Extension for re	eply within fifth month	<u> </u>		
1002 340 2002 170 Design filing fee	140	1 330	2401	165	Notice of Appe	al			
1003 530 2003 265 Plant filing fee	140	2 330	2402	165	Filing a brief in	support of an appeal			
1004 770 2004 385 Reissue filing fee	140	3 290	2403	145	Request for ora	al hearing			
1005 160 2005 80 Provisional filing fee	145	1 1,510	1451	1,510	Petition to instit	tute a public use proceeding			
	145		2452		Petition to reviv				
SUBTOTAL (1) (\$) 0.00		3 1.330	2453			ve - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSU	FI	1 1,330	2501		Utility issue fee				
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Independent - 3** = X = =			1460			Camminaiana.	 ≤ 		
Multiple Dependent	146				Petitions to the	Commissioner	<u> </u>		
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Large Entity Small Entity Fee Fee Fee Fee Fee Description	180	6 180	1806			Information Disclosure Stmt	6.		
Code (\$)	802	1 40	8021	40	Recording each	n patent assignment per number of properties)	5 #		
1202 18 2202 9 Claims in excess of 20	180	9 770	2809	385		number of properties) sion after final rejection (a))	8 7		
1201 86 2201 43 Independent claims in excess of 3	'''				(37 CFR 1.129	(a))	4		
1203 290 2203 145 Multiple dependent claim, if not paid	181	0 770	2810	385		onal invention to be CFR 1.129(b))	"\		
1204 86 2204 43 ** Reissue independent daims	1				examined (37 (CFR 1.129(b))			
over original patent	180		2801	385	Request for Co	ontinued Examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	180	2 900	1802	900	Request for ex of a design app	xpedited examination			
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**or number previously paid, if greater, For Reissues, see above	1		_uoio i			SUBTOTAL (3) (\$) 950.	00		
SUBMITTED BY						(Complete (if applicable))			
Name (Print/Type) Neil C. Jones		Registra (Attorney)		35,	561	Telephone 864/250-2260			

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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e application of: McDevitt, Jason P.; Tyrrell, David John

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AMENDMENT AND RESPONSE TRANSMITTAL

1. Transmitted herewith is an amendment for this application.

STATUS

2.

EXTENSION OF TERM

The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17) (4)) for three months:

Fee: \$950.00

Fee: \$950.00 3.

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)	(Co	ol. 2)	(C	ol. 3)	(OTHER THAN A			SMALL ENTITY		
	CLAIMS			•	-							
	REMAINING	HIGHI	EST NO.									
	AFTER	PREVIOUSLY		PRESENT						ADDIT.		
	AMENDMENT	PAID FOR		EXTRA		RATE				FEE		
TOTAL	26	-	32	=	0	х	\$	18.00	=	\$	0.00	
INDEP.	3	_	4	=	0	х	_\$	86.00	=	\$	0.00	
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						+	\$	0.00	=	\$	0.00	
								TOTAL				
							AΓ	DIT. FEE		\$	0.00	

Total additional fee for claims required \$0.00

FEE PAYMENT

5. Attached is check no. 24169 in the sum of \$950.00.

Charge any additional fees required by this paper or credit any overpayment to our Deposit Account No. 50-2548.

A duplicate copy of this paper is attached.

Date: March 8, 2004

Reg. No.: 35,561

Tel. No.: 864-250-2260

Signature of Practitioner

Neil C. Jones

Nelson Mullins Riley & Scarborough

Keenan Building, Third Floor

1330 Lady Street Columbia, SC 29201